PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004

Application or Docket Number

10/1/1/803

		CLAIMS A	S FILED (Colum		•	umn 2)		SMÅLL E	NTITY	OF		R THAN ENTITY
TOTAL CLAIMS								RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 395.00	OF	BASIC FEE	790.00
TOTAL CHARGEABLE CLAIMS			18 m	inus 20=	•			X\$ 9=		OF	X\$18=	
INI	DEPENDENT C	LAIMS	2 m	ninus 3 =				. X44=	1.		X88=	
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT	··· <u>·</u>				+150=		OR		·
* 11	the difference	e in column 1 is	less than zero, enter "0" in column 2			column 2	. 1	TOTAL		ОЯ	TOTAL	Thiw
		(Column 1)	MENDED - PART II (Column 2)			(Column 3)	<u>_</u>	SMALL	ENTITY	OR	OTHER SMALL	THAN
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X44=		OR	X88=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM		! t	+150=		1	+300=	
						·	L	TOTAL		OR	TOTAL	
	•	(Columba 4)		Calum	·- 0\	(Oakuma O	A	DDIT. FEE		OR	ADDIT. FEE	
		(Column 1)	·	(Colum		(Column 3)		·				
AMENDMENT B	•	REMAINING AFTER AMENDMENT		PREVIOI PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE.	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	• •
	Independent	•	Minus	***		=	9	X44=		OR	X88=	
Ľ	FIRST PRESE	NTATION OF MU	LTIPLE DEP	PENDENT	CLAIM		-	+150=		OR	+300=	
										OR A	TOTAL	
		(Column 4)		(Oal	- 0\	(O-1, 0)	. AL	DOT. FEE L		UN ,	DDIT. FEE	
1		(Column 1) CLAIMS		(Columi		(Column 3)	_					
AMENDMENIC	•	REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total -	•	Minus	. **		<u>.</u>	Γ	X\$ 9=	•	OR	X\$18=	
	Independent		Minus .	***		ė ·	-	X44=		. I	X88=	
_	FIRST PRESE	VITATION OF MU	LTIPLE DEP	ENDENT C	LAIM		1			OR		
• 16	the entry in entry	n 1 in lace than the	natas in natur	ng 3 sa			Ŀ	150=		OR.	+300=	
. ** #	the "Highest Nurr	nn 1 is less than the iber Previously Pak	For IN THIS	SPACE IS K	ess than	20. enter "20."	ADI	TOTAL DIT. FEE		OR A	TOTAL DOIT, FEE	
·Ti	uie "Highest Nun he "Highest Numb	nber Previously Paid per Previously Paid	For (Total or	SPACE is la Independent	ess than) is the h	3, enter ** *. lighest n الثناء er			opriate box			